

Modified PTO/SB/01 (12-97)

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DECLARATION	FOR UTILIT	Y OR	Attorney Docl	et Number	CGW-247					
DES	SIGN		First Named I	nventor	Ball					
PATENT AP (37 CFI			COMPLETE IF KNOWN							
			Application N	lumber						
	Declaration		Filing Date							
with Initial	Submitted after Filing (surcharg	rge	Group Art Ur	nit						
	(37 ČFR 1.16( required)	(e))	Examiner Na	me						
As a below named invento										
My residence, post office act I believe I am the original, finames are listed below) of the BURNERS FOR I	rst and sole invento the subject matter w	r (if only one na hich is claimed	ame is listed below) of land for which a pate	or an original, fire ent is sought on						
is attached hereto OR was filed on (MM/DE Application Number I hereby state that I have revamended by any amendmen I acknowledge the duty to di	CT/US99/216 viewed and understant specifically referre	and the content ed to above.	s amended on (MM/l	Inited States App	n, including the claims, as	ernational licable).				
I hereby claim foreign priority b certificate, or 365(a) of any PC America, listed below and have or of any PCT international app	T international appli e also identified belo	ication which dow, by checking	esignated at least on the box, any foreign	e country other in application for	than the United States of patent or inventor's certificate	∍,				
Prior Foreign Application Number(s)	Country		gn Filing Date M/DD/YYYY)	Priority Not Claimed	Certified Copy Attach YES NO	ied?				
Additional foreign appli	ication numbers are	listed on a sur	oplemental priority da	ita sheet PTO/S	B/02B attached hereto.					
hereby claim the benefit unde	er 35 U.S.C. 119(e) o	of any United S	tates provisional app	olication(s) listed	below.					
Application Number(s)		Filing Date 99/22/1998	e (MM/DD/YYYY)		Additional provisional a numbers are listed on supplemental priority d PTO/SB/02B attached	a ata sheet				



designating disclosed in acknowledg	the United Sta the prior Unite e the duty to d	under 35 U.S.C. 12 ates of America, Is ad States or PCT in isclose information application and the	ted below a nternationa n which is n	and, inso I applica naterial t	far as t tion in t o paten	he subjec he manne itability as	t matter proved the design of	er of each rided by the ed in 37 (	of the cone first pa OFR 1.56	laims of this a aragraph of 3	applica 5 U.S.	ation is not .C. 112, I
U.S. Parent Application or PCT Parent						ent Fili						
Number				<u>(N</u>	/IM/DD/	YYY	Y)	_	(if a	ppli	cable)	
Additio	nal U.S. or PC	T international app	nlication nu	imbers a	re lister	i on a sur	nlem	ental prior	ity data	sheet PTO/SF	8/02B	attached hereto
As a named	inventor, I here	by appoint the follow connected there	owing regis			<u>·</u>	<u>'</u>	•				
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	lame		Regi	stratioi imber				Nam			l	Registration Number
Maurice I				<u>.39</u> 9	-	Edwa						<u>38,25</u> 1
	Lauroesch Michaelse	•		.583 .511		Angel	a N.	Nwan	eri			34,229
		practitioner(s) nam			al Renis	tered Pra	ctition	er Inform	ation she	et PTO/SR/0	2C att	tached hereto
7.1001.10	- Togroto. od				ar regio		Ottoor					
Direct all co	orresponden	—	ustomer Ni Bar Code					OR	⊠ (	Corrrespond	ence	address below
Name	Maurice	M. Klee, Ph.[	D									
Address	Attorney	at Law										
Address	1951 Bui	<u>r Stre</u> et								1		
City	Fairfield					Stat	tate <u>CT</u>			ZIP	<u>0643</u> 0	
Country	US		Teleph	none	(203	3) 255-	1400	)		FAX	(20	03) 254-1101
believed to be punishable by	I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.											
Name of	Sole or F	irst Invento	r:				<u>_</u>	A pe	etition ha	s been filed fo	or this	unsigned inventor
Give	n Name (firs	t and middle [if a	anyl)					F	amily N	lame or Sur	name	e
Lau	ra J.				•			E	Ball			
Inventor's Signature		Dr. Laura Jame Ball				4			Date		3/6/01	
Residence	: City	Fountaine I			tate	FR	Xc.	ountry	FR	Citizensh	ip	US
Post Office	Address	27 Rue de	Le Cour	de								
Post Office	Address			,								
City		Fountaine l	e Port	State	,		ZIP	775	90	Country	,   F	R
Addi	tional inventor	s are being named	on the 2	_ supple	emental	Additiona	al Inve	ntor(s) sh	eets(s) F	PTO/SB/02A	attach	ed hereto.



## **DECLARATION**

# ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 2

Name of Addition	al Joint Inventor, if an	y:					A pe	etition has	s been filed for t	this	unsigned inventor	
Given Name (first and middle [if any])					Family Name or Surname							
Raymond E.					Lindner							
Inventor's Signature	Raymond E &	Date 3/15/01										
Residence: City							Country US		Citizenship	_	US	
Post Office Address	15 Clara Street											
Post Office Address												
City	Corning	State	,	NY	ZI	IP 14830		Country L		JS		
Name of Additiona	al Joint Inventor, if an	y:					A pe	tition has	s been filed for t	this	unsigned inventor	
Given Name (firs	t and middle [if any])					Family Name or Surname						
Mahendra Kur	mar						Misra					
Inventor's Signature	Udd 1	C 1		ب					4/9/01 Date			
Residence: City	Horseheads	Stat	eN	YNY	1	Country US		Citizenship		US		
Post Office Address	11 Barrington Road											
Post Office Address							·					
City	Horseheads	State	,	NY	ZI	Р	P 14845		Country	ι	JS	
Name of Additiona	al Joint Inventor, if an	y:					A pe	tition has	s been filed for t	his	unsigned inventor	
Given Name (firs	and middle [if any])					Family Name or Surname						
Dale R.						Powers						
Inventor's Signature	Dale R.	Po	m	سععا	_				Date			
Residence: City	Painted Post	Stat	PUL	NY	•	Cou	intry	US	Citizenship		US	
Post Office Address	112 Weston Lane											
Post Office Address												
City	Painted Post,	State		NY	ZI	Р	1487	70	Country	Ĺ	JS	



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# **DECLARATION**

# ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 2

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Name of Additional Joint Inventor, if any:						A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])						Family Name or Surname						
Raymond E.						Lindner						
Inventor's Signature			Date									
Residence: City	Corning State NY C					Country US		Citizenship		US		
Post Office Address	15 Clara Street											
Post Office Address												
City	Corning	State	9	NY	Z	IP	1483	30	Country L		JS	
Name of Additiona	al Joint Inventor, if an	y:					A pe	tition ha	s been filed for t	his	unsigned inventor	
Given Name (first	t and middle [if any])						F	amily N	ame or Surna	ıme	e	
Mahendra Kur	mar						М	isra				
Inventor's Signature						Date						
Residence: City	Horseheads	Sta	te	NY		Country		US	Citizenship		US	
Post Office Address	11 Barrington Road											
Post Office Address												
City	Horseheads	State	е	NY	z	IP	P 14845		Country	Į	JS	
Name of Addition	al Joint Inventor, if an	y:					Аре	tition ha	s been filed for t	his	unsigned inventor	
Given Name (first	t and middle [if any])						F	amily N	ame or Surna	me	e	
Dale R.						Powers						
Inventor's Signature	DoleRT	an	re	2,,,,	-		19 30,700, Date				/	
Residence: City	Painted Post	1					Country US		Citizenship		US	
Post Office Address	112 Weston Lane											
Post Office Address												
City	Painted Post,	State	е	NY	z	IP	148	70	Country	ι	JS	

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# **DECLARATION**

### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 2

Name of Additional Joint Inventor, if any:						A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])					Family Name or Surname						
Michael H.	Michael H.					Wasilewski					
Inventor's Signature	Milas 18.1. Corning	iloma	lo,	Date 3//				61			
Residence: City	Corning	State	MANY		Country US		Citizenship	us			
Post Office Address	1617 RD#2 Riff Road										
Post Office Address											
City	Corning	State		Z	IP	IP 14830		Country	US		
Name of Addition	al Joint Inventor, if an	ıy:				A pe	tition ha	s been filed for t	this unsigned inventor		
Given Name (firs	t and middle [if any])		_			F	amily N	ame or Surna	ıme		
Inventor's Signature								Date			
Residence: City		State		1	Country		Citizenship				
Post Office Address							·				
Post Office Address											
City		State		ZI	IP			Country			
Name of Addition	al Joint Inventor, if an	y:				A pe	tition has	s been filed for t	his unsigned inventor		
Given Name (firs	t and middle [if any])				Family Name or Surname						
Inventor's Signature								Date			
Residence: City		State			Country			Citizenship			
Post Office Address											
Post Office Address											
City		State		ZI	IP			Country			

